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CONFIRMATION NO. 4476

SERIAL NUMBER 10/828,683	FILING OR 371(c) DATE 04/21/2004 RULE	CLASS 514	GROUP ART UNIT 1617	ATTORNEY DOCKET NO. PHA 42631.1 (01381/2/US)
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APPLICANTS

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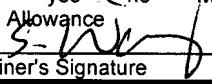
** CONTINUING DATA *****

This appln claims benefit of 60/464,775 04/23/2003 and claims benefit of 60/464,609 04/22/2003

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/25/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CT	SHEETS DRAWING 0	TOTAL CLAIMS 38	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	 Examiner's Signature	Initials			

ADDRESS

45734

TITLE

Compositions of a cyclooxygenase-2 selective inhibitor and a sodium ion channel blocker for the treatment of pain, inflammation or inflammation mediated disorders

FILING FEE RECEIVED 1396	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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